

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BA	70385	
O.I.P.E. CLASSIFIER		16	1-29-99
FORMALITY REVIEW		69300	

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 (Through numeral) ... Canceled      A ..... Appeal  
 - ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	5-11-00
2	5-20-00
3	7-18-01
4	8-19-02
5	8-21-03
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8	8-21-03
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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